

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 5
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Make DC Listen			FEC IDENTIFICATION NUMBER ▼ C C00570739		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee Make DC Listen			Date of Public Distribution/Dissemination 05 / 16 / 2015		
Mailing Address 824 S Milledge Ave Ste 101			Amount 939.55		
City Athens	State GA	Zip Code 30605	Transaction ID : EC0B7F4D290384BCBAF3 Date of Disbursement or Obligation 05 / 16 / 2015		
Purpose of Expenditure Donation Processing		Category/ Type 			
Name of Federal Candidate Ted Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		39707.63	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Shirazcorp.com			Date of Public Distribution/Dissemination 05 / 19 / 2015		
Mailing Address 1521 Concord Pike, Ste 301			Amount 6164.00		
City Wilmington	State DE	Zip Code 19803-3644	Transaction ID : E0C60FFCE186B45F5AD9 Date of Disbursement or Obligation 05 / 19 / 2015		
Purpose of Expenditure Email List Rental		Category/ Type 			
Name of Federal Candidate Ted Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		45871.63	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			7103.55		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Paul Kilgore</i>		[Electronically Filed]		Date 06 / 10 / 2015	

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Form/Schedule: F24N

Transaction ID :

The independent expenditures listed in this 48 Hour Notice Filing were all for expenditures of communications and items that were disseminated nationally and equally distributed among the states.

Form/Schedule:

Transaction ID:

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Full Name of Payee Make DC Listen			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 23 / 2015	
Mailing Address 824 S Milledge Ave Ste 101			Amount 686.95	
City Athens	State GA	Zip Code 30605	Transaction ID : E5BE1353731BF43409FE	
Purpose of Expenditure Donation Processing		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 23 / 2015	
Name of Federal Candidate Ted Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		46558.58	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Make DC Listen			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 30 / 2015	
Mailing Address 824 S Milledge Ave Ste 101			Amount 266.00	
City Athens	State GA	Zip Code 30605	Transaction ID : E0D714932EC0E4F59816	
Purpose of Expenditure Donation Processing		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 05 / 30 / 2015	
Name of Federal Candidate Ted Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		46824.58	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	952.95
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Paul Kilgore

[Electronically Filed]

Date

MM / DD / YYYY
06 / 10 / 2015

Signature

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Make DC Listen		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 06 / 2015	
Mailing Address 824 S Milledge Ave Ste 101		Amount 205.70	
City Athens	State GA	Zip Code 30605	Transaction ID : E6F1D846F2A02445AB27
Purpose of Expenditure Donation Processing	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 06 / 06 / 2015	
Name of Federal Candidate Ted Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Alliance Strategy Group		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 08 / 2015	
Mailing Address 7700 Congress Ave, Ste 3208		Amount 1953.50	
City Boca Raton	State FL	Zip Code 33487-1358	Transaction ID : E83184C470D06452D8F1
Purpose of Expenditure Email List Rental	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 06 / 09 / 2015	
Name of Federal Candidate Ted Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2159.20
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee Thomas Graphics, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 08 / 2015
Mailing Address PO Box 142226		Amount 1112.44
City Austin	State TX	Zip Code 78714-2226
Purpose of Expenditure Bumper Sticker Printing	Category/ Type	Transaction ID : E6D317B2ECE9D4BB9A6F Date of Disbursement or Obligation MM / DD / YYYY 06 / 09 / 2015
Name of Federal Candidate Ted Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought 51948.22		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Conservative Connector, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 08 / 2015
Mailing Address 190 Monroe Ave NW, Ste 500		Amount 1852.00
City Grand Rapids	State MI	Zip Code 49503-2628
Purpose of Expenditure Email List Rental	Category/ Type	Transaction ID : E2FAAEF6DC201468C91A Date of Disbursement or Obligation MM / DD / YYYY 06 / 08 / 2015
Name of Federal Candidate Ted Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought 51948.22		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2964.44
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	13180.14

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Date

MM / DD / YYYY
06 / 10 / 2015

Signature